

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

Oregon Republican Party

ADDRESS (number and street)

2720 Commercial St SE #210

☐Check if different
than previously
reported. (ACC)

Salem

OR

97302

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00153031

3. IS THIS
REPORT☒NEW
(N)**OR**☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☒

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

01

01

2006

through

01

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Charles S. Oakes

Signature of Treasurer

Electronically Filed by Charles S. Oakes

Date

02

20

2006

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 02/2003)

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	6

To:

M	M	D	D	Y	Y	Y	Y
0	1	3	1	2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2006		8109.60
(b) Cash on Hand at Beginning of Reporting Period	8109.60	
(c) Total Receipts (from Line 19)	34020.53	34020.53
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	42130.13	42130.13
7. Total Disbursements (from Line 31)	34112.45	34112.45
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	8017.68	8017.68
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	92275.86	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name
Oregon Republican Party

Report Covering the Period:

From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	6

To:

M	M
0	1

D	D
3	1

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	6471.00	6471.00
(i) Itemized (use Schedule A)	7807.00	7807.00
(ii) Unitemized	14278.00	14278.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) ➤	0.00	0.00
(b) Political Party Committees	5300.00	5300.00
(c) Other Political Committees (such as PACs)	19578.00	19578.00
(d) Total Contributions (add Lines 11(a)(iii), (b) and (c)) (Carry Totals to Line 33, page 5) ➤		
12. Transfers From Affiliated/Other Party Committees	14442.53	14442.53
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	34020.53	34020.53
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	34020.53	34020.53

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	1061.01	1061.01
(ii) Non-Federal Share.....	6012.39	6012.39
(b) Other Federal Operating Expenditures.....	17984.37	17984.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	25057.77	25057.77
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	9054.68	9054.68
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	9054.68	9054.68
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	34112.45	34112.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	28100.06	28100.06

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	19578.00	19578.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	19578.00	19578.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	19045.38	19045.38
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	19045.38	19045.38

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Wayne Brady

Mailing Address 4742 Liberty Rd S PMB280

City

Salem

State

OR

Zip Code

97302-5037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

96.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 0 3 / 2 0 0 6

Transaction ID: 60220.C86553

Amount of Each Receipt this Period

96.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Wayne Brady

Mailing Address 4742 Liberty Rd S PMB280

City

Salem

State

OR

Zip Code

97302-5037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

346.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 2 1 / 2 0 0 6

Transaction ID: 60220.C86629

Amount of Each Receipt this Period

250.00

Receipt

C.

Full Name (Last, First, Middle Initial)

Wayne Brady

Mailing Address 4742 Liberty Rd S PMB280

City

Salem

State

OR

Zip Code

97302-5037

FEC ID number of contributing
federal political committee.

C

Name of Employer
Retired

Occupation
Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

421.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 1 / 3 0 / 2 0 0 6

Transaction ID: 60220.C86654

Amount of Each Receipt this Period

75.00

Receipt

SUBTOTAL of Receipts This Page (optional)

421.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial) Jeanette Brink		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 8 / 2 0 0 6
Mailing Address 5859 SE Quiet Meadows Dr		Transaction ID: 60213.C86464
City Portland	State OR	Zip Code 97267
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
Name of Employer Information Requested	Occupation Information Requested	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

B. Full Name (Last, First, Middle Initial) Donna Cain		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 0 / 2 0 0 6
Mailing Address 6580 E. Evans Creek		Transaction ID: 60220.C86653
City Rogue River	State OR	Zip Code 97537
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 550.00
Name of Employer Information Requested	Occupation Homemaker	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

C. Full Name (Last, First, Middle Initial) George and Gordon Glass		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 3 / 2 0 0 6
Mailing Address 16715 Phantom Bluff Ct		Transaction ID: 60220.C86635
City Lake Oswego	State OR	Zip Code 97034-5753
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5000.00
Name of Employer Student	Occupation Student	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)

5750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 25

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Richard Lindholm

Mailing Address 3335 Bardell Ave

City

Eugene

State

OR

Zip Code

97401-8021

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 1 / 2 0 0 6

Transaction ID: 60220.C86628

Amount of Each Receipt this Period

300.00

Receipt

SUBTOTAL of Receipts This Page (optional)

300.00

TOTAL This Period (last page this line number only)

6471.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 9 / 25

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Oregon Auto Dealers

Mailing Address PO Box 14460
777 NE Seventh Ave.

City State Zip Code
Portland OR 97293-0460

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
PAC # 0133

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 4 / 2 0 0 6

Transaction ID: 60220.C86641

Amount of Each Receipt this Period

300.00

Receipt

B.

Full Name (Last, First, Middle Initial)

Straight Talk America

Mailing Address 211 N Union St Ste 200

City State Zip Code
Alexandria VA 22314-2643

FEC ID number of contributing
federal political committee.

C

Name of Employer
FEC# C00413245

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 3 / 2 0 0 6

Transaction ID: 60220.C86636

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

5300.00

TOTAL This Period (last page this line number only)

5300.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
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FOR LINE NUMBER: PAGE 10 / 25

(check only one)

☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A.

Full Name (Last, First, Middle Initial)

Oregon Republican Party

Mailing Address Key Bank Non federal acct

City State Zip Code
 Salem OR 97302-

FEC ID number of contributing federal political committee.

C C00153031Name of Employer
PAC # 0379Occupation
Political Party

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2932.72

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 0 6 / 2 0 0 6

Transaction ID: 60220.C86591

Amount of Each Receipt this Period

2932.72

Transfers From Affil./Aut-h.

B.

Full Name (Last, First, Middle Initial)

Oregon Republican Party

Mailing Address Key Bank Non federal acct

City State Zip Code
 Salem OR 97302-

FEC ID number of contributing federal political committee.

C C00153031Name of Employer
PAC # 0379Occupation
Political Party

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7009.72

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 0 6 / 2 0 0 6

Transaction ID: 60220.C86592

Amount of Each Receipt this Period

4077.00

Transfers From Affil./Aut-h.

C.

Full Name (Last, First, Middle Initial)

Oregon Republican Party

Mailing Address Key Bank Non federal acct

City State Zip Code
 Salem OR 97302-

FEC ID number of contributing federal political committee.

C C00153031Name of Employer
PAC # 0379Occupation
Political Party

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

12174.49

Date of Receipt

M M / D D / Y Y Y Y
 0 1 / 2 5 / 2 0 0 6

Transaction ID: 60220.C86642

Amount of Each Receipt this Period

5164.77

Transfers From Affil./Aut-h.

SUBTOTAL of Receipts This Page (optional)

12174.49

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☒ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
Oregon Republican Party

Mailing Address Key Bank Non federal acct

City State Zip Code
Salem OR 97302-

FEC ID number of contributing
federal political committee.

C C00153031

Name of Employer
PAC # 0379

Occupation
Political Party

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

14442.53

Date of Receipt

M M / D D / Y Y Y Y
0 1 / 2 5 / 2 0 0 6

Transaction ID: 60220.C86643

Amount of Each Receipt this Period

2268.04

Transfers From Affil./Aut-
h.

SUBTOTAL of Receipts This Page (optional)

2268.04

TOTAL This Period (last page this line number only)

14442.53

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. International Aristotle

Mailing Address 205 Pennsylvania Ave SE

City
Washington

State
DC

Zip Code
20003-

Purpose of Disbursement
SOFTWARE SUPPORT

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11905

Date of Disbursement

/ /

Amount of Each Disbursement this Period

3900.00

SOFTWARE SUPPORT

Full Name (Last, First, Middle Initial)

B. Vance Day

Mailing Address PO Box 546

City
Salem

State
OR

Zip Code
97308-0546

Purpose of Disbursement
REIMBURSE FOR PHONE COSTS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11900

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1939.67

REIMBURSE FOR PHONE COSTS

Full Name (Last, First, Middle Initial)

C. Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City
Clearwater

State
FL

Zip Code
34622-

Purpose of Disbursement
PARTY BUILDING DIRECT MAIL FUNDRAIS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11890

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

PARTY BUILDING DIRECT MAIL
FUNDRAIS

SUBTOTAL of Disbursements This Page (optional)

6839.67

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Direct Mail Systems, Inc

Mailing Address 12450 Automobile Boulevard

City
Clearwater

State
FL

Zip Code
34622-

Purpose of Disbursement
PARTY BUILDING DIRECT MAIL FUNDRAIS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11914

Date of Disbursement

/ /

Amount of Each Disbursement this Period

4340.00

PARTY BUILDING DIRECT MAIL
FUNDRAIS

Full Name (Last, First, Middle Initial)

B. Lightwave Electric Lightwave

Mailing Address PO Box 20553

City
Rochester

State
NY

Zip Code
14602-

Purpose of Disbursement
GENERIC AUTODIALER

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11911

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1270.70

GENERIC AUTODIALER

Full Name (Last, First, Middle Initial)

C. Eschelon Teleco (Advanced Telecom)

Mailing Address PO Box 34988

City
Seattle

State
WA

Zip Code
98124-1988

Purpose of Disbursement
PHONE BILL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11904

Date of Disbursement

/ /

Amount of Each Disbursement this Period

630.13

PHONE BILL

SUBTOTAL of Disbursements This Page (optional)

6240.83

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. FL&S

Mailing Address 7320 N Dreamy Draw Dr

City Phoenix State AZ Zip Code 85020-5212

Purpose of Disbursement
PARTY BUILDING TELEMARKET FUNDRAISI

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11891

Date of Disbursement

01 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

PARTY BUILDING TELEMARKET
FUNDRAISI

Full Name (Last, First, Middle Initial)

B. Kevin Hoar

Mailing Address 4149 NW 178th Pl.

City Portland State OR Zip Code 97229-9303

Purpose of Disbursement
REIMBURSE FOR AUTODIALER COSTS

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11892

Date of Disbursement

01 / 24 / 2006

Amount of Each Disbursement this Period

680.41

REIMBURSE FOR AUTODIALER
COSTS

Full Name (Last, First, Middle Initial)

C. Huckaby Davis Lisker

Mailing Address 228 S Washington St Ste 115

City Alexandria State VA Zip Code 22314-5404

Purpose of Disbursement
CONSULTANT RE: FEC COMPLIANCE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11913

Date of Disbursement

01 / 25 / 2006

Amount of Each Disbursement this Period

757.48

CONSULTANT RE: FEC COMPLI-
ANCE

SUBTOTAL of Disbursements This Page (optional)

2437.89

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 15 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Key bank

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
CHARGEBACK

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11898

Date of Disbursement

/ /

Amount of Each Disbursement this Period

200.00

CHARGEBACK

Full Name (Last, First, Middle Initial)

B. Key bank

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
AUTHNET CTS MERCHANT CHARGES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11899

Date of Disbursement

/ /

Amount of Each Disbursement this Period

28.70

AUTHNET CTS MERCHANT CHARGES

Full Name (Last, First, Middle Initial)

C. Key Corporate Card

Mailing Address PO Box 9004

City Des Moines State IA Zip Code 50368-9004

Purpose of Disbursement
OPERATIONAL EXPENSES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11912

Date of Disbursement

/ /

Amount of Each Disbursement this Period

210.00

OPERATIONAL EXPENSES

SUBTOTAL of Disbursements This Page (optional)

438.70

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 16 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11893

Date of Disbursement

MM / DD / YYYY
01 / 04 / 2006

Amount of Each Disbursement this Period

277.96

POSTAGE MACHINE LEASE

Full Name (Last, First, Middle Initial)

B. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11894

Date of Disbursement

MM / DD / YYYY
01 / 11 / 2006

Amount of Each Disbursement this Period

273.52

POSTAGE MACHINE LEASE

Full Name (Last, First, Middle Initial)

C. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City Louisville State KY Zip Code 40285-5460

Purpose of Disbursement
POSTAGE MACHINE LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11895

Date of Disbursement

MM / DD / YYYY
01 / 18 / 2006

Amount of Each Disbursement this Period

273.52

POSTAGE MACHINE LEASE

SUBTOTAL of Disbursements This Page (optional)

825.00

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 17 / 25

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City
Louisville

State
KY

Zip Code
40285-5460

Purpose of Disbursement
POSTAGE MACHINE LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11896

Date of Disbursement

/ /

Amount of Each Disbursement this Period

273.52

POSTAGE MACHINE LEASE

Full Name (Last, First, Middle Initial)

B. Pitney Bowes Credit Corp

Mailing Address P. O. Box 85460

City
Louisville

State
KY

Zip Code
40285-5460

Purpose of Disbursement
POSTAGE MACHINE LEASE

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11897

Date of Disbursement

/ /

Amount of Each Disbursement this Period

273.52

POSTAGE MACHINE LEASE

SUBTOTAL of Disbursements This Page (optional)

547.04

TOTAL This Period (last page this line number only)

17329.13

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 25

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input checked="" type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Key bank

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11886

Date of Disbursement

01 / 01 / 2006

Amount of Each Disbursement this Period

1245.86

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

B. Key bank

Mailing Address 1500 Edgewater St NW

City Salem State OR Zip Code 97304-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11887

Date of Disbursement

01 / 15 / 2006

Amount of Each Disbursement this Period

1036.90

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City Salem State OR Zip Code 97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11882

Date of Disbursement

01 / 01 / 2006

Amount of Each Disbursement this Period

2079.95

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

4362.71

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 19 / 25

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Amy Langdon

Mailing Address 2830 Foxhaven Dr S

City
Salem

State
OR

Zip Code
97306-

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11883

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

2291.95

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Oregon Department of Revenue

Mailing Address PO Box 14800

City
Salem

State
OR

Zip Code
97309-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11888

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 0 1 / 2 0 0 6

Amount of Each Disbursement this Period

264.00

FEA PAYROLL TAXES

Full Name (Last, First, Middle Initial)

C. Oregon Department of Revenue

Mailing Address PO Box 14800

City
Salem

State
OR

Zip Code
97309-

Purpose of Disbursement
FEA PAYROLL TAXES

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: 60220.E11889

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

251.00

FEA PAYROLL TAXES

SUBTOTAL of Disbursements This Page (optional)

2806.95

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 20 / 25

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☒ 30b

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NAME OF COMMITTEE (In Full)

Oregon Republican Party

Full Name (Last, First, Middle Initial)

A. Cindy Wolfe

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11884

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 0 1 / 2 0 0 6

Amount of Each Disbursement this Period

937.52

FEA PAYROLL

Full Name (Last, First, Middle Initial)

B. Cindy Wolfe

Mailing Address 595 Rockwood St SE

City Salem State OR Zip Code 97306-1756

Purpose of Disbursement
FEA PAYROLL

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 60220.E11885

Date of Disbursement

M M / D D / Y Y Y Y
0 1 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

947.50

FEA PAYROLL

SUBTOTAL of Disbursements This Page (optional)

1885.02

TOTAL This Period (last page this line number only)

9054.68

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 21 / 25

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
FL&S

Nature of Debt (Purpose):
Party Building telemarket
fundraisi

Mailing Address 7320 N Dreamy Draw Dr

City State ZIP Code
Phoenix AZ 85020-5212

Outstanding Balance Beginning This Period

22811.30

Transaction ID: LS60220.E11891

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

21811.30

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Direct Mail Systems, Inc

Nature of Debt (Purpose):
Party Building Direct Mail
fundrais

Mailing Address 12450 Automobile Boulevard

City State ZIP Code
Clearwater FL 34622-

Outstanding Balance Beginning This Period

2564.49

Transaction ID: LS60220.E11890

Amount Incurred This Period

0.00

Payment This Period

1000.00

Outstanding Balance at Close of This Period

1564.49

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Lightwave Electric Lightwave

Nature of Debt (Purpose):
Phone Bill

Mailing Address PO Box 20553

City State ZIP Code
Rochester NY 14602-

Outstanding Balance Beginning This Period

348.88

Transaction ID: LSE11632

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

348.88

1) **SUBTOTALS** This Period This Page (optional).....

23724.67

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 22 / 25

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Pitney Bowes Purchase Power

Nature of Debt (Purpose):
Postage

Mailing Address PO Box 856042

City State ZIP Code
Louisville KY 40285-

Outstanding Balance Beginning This Period

896.99

Transaction ID: LSE8965

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

896.99

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Eagle Teleconferencing

Nature of Debt (Purpose):
phone bill

Mailing Address 207 West Washington Street

City State ZIP Code
Rushville IL 62681-

Outstanding Balance Beginning This Period

473.30

Transaction ID: LSE11559

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

473.30

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
AT&T Wireless

Nature of Debt (Purpose):
Cell phone bills

Mailing Address PO Box 79075

City State ZIP Code
Phoenix AZ 85062-

Outstanding Balance Beginning This Period

67180.90

Transaction ID: LSE11336

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

67180.90

1) **SUBTOTALS** This Period This Page (optional).....

68551.19

2) **TOTALS** This Period (last page this line number only).....3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only).....4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 23 / 25

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)
Oregon Republican Party

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Connolly & Goldian

Nature of Debt (Purpose):
legal fees

Mailing Address PO Box 3095

City State ZIP Code
Salem OR 97302-

Outstanding Balance Beginning This Period

187.90

Transaction ID: LS60220.E11906

Amount Incurred This Period

0.00

Payment This Period

187.90

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional)..... ▶

0.00

2) **TOTALS** This Period (last page this line number only)..... ▶

92275.86

3) **TOTALS OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2)** and **3)** and carry forward to appropriate line of Summary Page (last page only) ▶

METHOD OF ALLOCATION FOR:

- **SHARED FEDERAL AND NONFEDERAL ADMINISTRATIVE, GENERIC VOTER DRIVE AND EXEMPT ACTIVITY COSTS**
- **SHARED FEDERAL AND LEVIN FUNDS FEDERAL ELECTION ACTIVITY EXPENSES** (State, District and Local Party Committees Only)
- **ALLOCATED PUBLIC COMMUNICATIONS THAT REFER TO ANY POLITICAL PARTY (BUT NOT A CANDIDATE)**(Seperate Segregated Funds And Nonconnected Committees Only)

NAME OF COMMITTEE (In Full)

Oregon Republican Party

USE ONLY ONE SECTION, A or B**A. State and Local Party Committees****Fixed Percentage (select one)**

- _____ Presidential-Only Election Year (28% Federal)
- _____ Presidential and Senate Election Year (36% Federal)
- _____ Senate-Only Election Year (21% Federal)
- X Non-Presidential and Non-Senate Election Year (15% Federal)

B. Separate Segregated Funds and Nonconnected Committees**Flat Minimum Federal Percentage**If the committee will allocate using the flat minimum percentage of 50% federal funds, check ☐**or**

If the committee is spending more than 50% federal funds, indicate ratio below

Federal..... %Nonfederal..... %

This ratio applies to (check all that apply):

Administrative ☐ Generic Voter Drive ☐ Public Communications Referencing Party Only ☐

SCHEDULE H4 (FEC Form 3X) **DISBURSEMENT FOR ALLOCATED** **FEDERAL/NONFEDERAL ACTIVITY**

PAGE 25 / 25
 FOR LINE 21a OF FORM 3X

NAME OF COMMITTEE (In Full)

Oregon Republican Party

A. Full Name (Last, First, Middle Initial)
 Hartford Insurance

Mailing Address

PO Box 33015

City	State	Zip Code
------	-------	----------

San Antonio	TX	78265-
-------------	----	--------

Purpose of Disbursement:
 Liability Insurance

Category/ Type

Activity or Event Identifier:
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

700.00

Date

M	M
0	1

 /

D	D
0	6

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: H460220.E11901

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

105.00

595.00

700.00

B. Full Name (Last, First, Middle Initial)
 Certified Property

Mailing Address

PO Box 269

City	State	Zip Code
Salem	OR	97308-0269

Purpose of Disbursement:
 Office Rent - January in full

Category/ Type

Activity or Event Identifier:
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

6776.20

Date

M	M
0	1

 /

D	D
2	3

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: H460220.E11902

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

911.43

5164.77

6076.20

C. Full Name (Last, First, Middle Initial)
 LifeWise

Mailing Address

815 SW Bond St

City	State	Zip Code
Bend	OR	97702-

Purpose of Disbursement:
 health insurance

Category/ Type

Activity or Event Identifier:
 ADMINISTRATION B 41

Type of Allocated Activity:

☒ Administrative ☐ Fundraising ☐ Exempt
☐ Voter Drive ☐ Direct Candidate Support

☐ Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

7073.40

Date

M	M
0	1

 /

D	D
2	5

 /

Y	Y	Y	Y
2	0	0	6

Transaction ID: H460220.E11903

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

44.58

252.62

297.20

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE

+

NONFEDERAL SHARE

= TOTAL AMOUNT

1061.01

6012.39

7073.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(ii))

FEDERAL SHARE

NONFEDERAL SHARE

TOTAL AMOUNT

1061.01

6012.39

7073.40